

DECLARATION OF COSTS AND OTHER RELATED PROPERTY INFORMATION AS OF 12:01 A.M., JANUARY 1, 2014  
RETURN THIS ORIGINAL FORM. COPIES WILL NOT BE ACCEPTED.

LOCATION OF THE BUSINESS PROPERTY – STREET, CITY

NAME AND MAILING ADDRESS

ASSESSOR'S PARCEL NUMBER

BOOKPAGEPCLPARSEQ  
COMPANY NUMBERACCOUNT NUMBER E-FILE DIR BIL

DISTUSERESPONLYANAY

PRIORPNFIXTURESPERSONAL PROPERTY

Part I GENERAL INFORMATION

COMPLETE (a) THRU (g)

a. Enter type of business:

b. Enter local telephone no. ( ) Fax No. ( )

E-mail address (optional)

c. Do you own the land at this business location? YES NO

If "Yes," is the name on your deed recorded as shown on this statement? YES NO

d. When did you start business at this location? DATE:

If your business name or location has changed from last year, enter the former name and/or location

e. Enter location of general ledger and all related accounting records (include ZIP).

f. Enter name and telephone no. of authorized person to contact at location of accounting records.

g. During the period of JANUARY 1, 2013 through DECEMBER 31, 2013

(1) Did any individual or legal entity (corporation, partnership, limited liability company, etc.) acquire a "controlling interest" (see instructions for definition) in this business entity? YES NO

(2) If YES, did this business entity also own "real property" (see instructions for definition) in California at the time of the acquisition? YES NO

(3) If YES to both questions (1) and (2), filer must submit form BOE-100-B, Statement of Change in Control and Ownership of Legal Entities, to the State Board of Equalization. See instructions for filing requirements.

Part II DECLARATION OF PROPERTY BELONGING TO YOU

Attach Schedule For Any Adjustment To Cost

1. Supplies

2. Equipment (From Line 35)

3. Equipment Out on Lease, Rent, or Conditional Sale to Others Attach Schedule

4. Bldgs., Bldg. Impr., and/or Leasehold Impr., Land Impr., Land (From Line 71)

5. Construction in Progress (Attach Schedule)

6. Alternate Schedule A See Instructions

7.

8.

COST (Omit Cents) (see instructions)

ASSESSOR'S USE ONLY

FULL CASH VALUEENROLLED VALUE

FIXTURESPERSONAL PROPTOTAL F.C.V.

Part III DECLARATION OF PROPERTY BELONGING TO OTHERS – IF NONE WRITE "NONE"

REPORT CONDITIONAL SALES CONTRACTS THAT ARE NOT LEASES ON SCHEDULE A (SPECIFY TYPE BY CODE NUMBER)

1. Leased Equipment

2. Lease-Purchase Option Equipment

3. Capitalized Lease Equipment

4. Vending Equipment

5. Other Businesses

6. Government-Owned Property

Year of Acq.

Year of Mfr.

Description and Lease or Identification Number

Cost to Purchase New

Annual Rent

Tax Obligation: A. Lessor B. Lessee

9. Lessor's Name Mailing Address

10. Lessor's Name Mailing Address

OWNERSHIP TYPE (✓)

Proprietorship

Partnership

Corporation

Other

BUSINESS DESCRIPTION (✓)

Retail

Wholesale

Manufacturer

Service-Professional

DECLARATION BY ASSESSEE

Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.

I declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 2014.

SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT\*

NAME OF ASSESSEE OR AUTHORIZED AGENT\* (typed or printed) TITLE DATE

NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID #

PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NO.

ASSESSOR'S USE ONLY

APPLY AE LATE  
10%PY FILING

APPRAISER #

Date

Approval

COPIES:

Assessee'

\* AGENT: See page 7 for Declaration By Assessee instructions.

on By Assessee instructions. **THIS STATEMENT SUBJECT TO AUDIT**  
INFORMATION PROVIDED ON A PROPERTY STATEMENT MAY BE SHARED WITH THE STATE BOARD OF EQUALIZATION

Attach schedules as needed. Lines 18, 32, 33, and 45 "Prior" — Report detail by year(s) of acquisition on a separate schedule.

LINE NO	Calendar Year of Acq.	1. MACHINERY AND EQUIPMENT FOR INDUSTRY, PROFESSION, OR TRADE <i>(do not include licensed vehicles)</i>	2. OFFICE FURNITURE AND EQUIPMENT	3. OTHER EQUIPMENT <i>(describe)</i>	Calendar Year of Acq.	4. TOOLS, MOLDS, DIES, JIGS
		COST	ASSESSOR'S USE ONLY	COST		ASSESSOR'S USE ONLY
11	2013				2013	
12	2012				2012	
13	2011				2011	
14	2010				2010	
15	2009				2009	
16	2008				2008	
17	2007				2007	
18	2006				Prior	
19	2005				Total	
20	2004				Calendar Year of Acq.	5a. PERSONAL COMPUTERS
21	2003					
22	2002					COST
23	2001				2013	
24	2000				2012	
25	1999				2011	
26	1998				2010	
27	1997				2009	
28	1996				2008	
29	1995				2007	
30	1994				2006	
31	1993				2005	
32	1992				Prior	
33	Prior				Total	
34	Total				Calendar Year of Acq.	5b. LOCAL AREA NETWORK (LAN) EQUIPMENT AND MAINFRAMES
35	Add TOTALS for lines 19, 33, 34, 46 and any additional schedules. ENTER HERE AND ON PART II, LINE 2					
Remarks						COST
36					2013	
37					2012	
38					2011	
39					2010	
40					2009	
41					2008	
42					2007	
43					2006	
44					2005	
45					Prior	
46					Total	

SCHEDULE B — COST DETAIL: BUILDINGS, BUILDING IMPROVEMENTS, AND/OR LEASEHOLD IMPROVEMENTS, LAND IMPROVEMENTS, LAND AND LAND DEVELOPMENT

Attach schedules as needed. Line 69 "Prior" — Report detail by year(s) of acquisition on a separate schedule.

LINE NO	Calendar Yr. of Acq.	BUILDINGS, BUILDING IMPROVEMENTS, AND/OR LEASEHOLD IMPROVEMENTS				3. LAND IMPROVEMENTS <i>(e.g., blacktop, curbs, fences)</i>	4. LAND AND LAND DEVELOPMENT <i>(e.g., fill, grading)</i>		
		1. STRUCTURE ITEMS ONLY <i>(see instructions)</i>		2. FIXTURES ONLY <i>(see instructions)</i>					
		COST	ASSESSOR'S USE ONLY	COST	ASSESSOR'S USE ONLY			COST	ASSESSOR'S USE ONLY
47	2013								
48	2012								
49	2011								
50	2010								
51	2009								
52	2008								
53	2007								
54	2006								
55	2005								
56	2004								
57	2003								
58	2002								
59	2001								
60	2000								
61	1999								
62	1998								
63	1997								
64	1996								
65	1995								
66	1994								
67	1993								
68	1992								
69	PRIOR								
70	TOTAL								
71	Add Totals on Line 70 and any additional schedules					ENTER HERE AND ON PART II, LINE 4			
72	Have you received allowances for tenant improvements for the current reporting period that are not reported above? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>yes</b> indicate amount \$ _____.								

REMARKS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

LOCATION OF PROPERTY

**DISPOSALS** — Information on this property should include the disposal date, method of disposal (transfer, scrapped, abandoned, sold, etc.) and names and addresses of purchasers when items are either sold or transferred.

[illegible]